APPENDICE.

RAPPORT

DE

MONSIEUR L'OFFICIER DE LA SANTÉ PUBLIQUE, 1931.

XIV.—1932.

RAPPORT DE MONSIEUR L'OFFICIER DE LA SANTE PUBLIQUE, 1931.

States Office, Guernsey, 3rd October, 1932.

Sir,

I have the honour to forward herewith the Annual Report of the Medical Officer of Health for the year 1931, with the request that it may be printed as an Appendix to a Billet d'Etat, and that a number of copies (say 100), be struck off for distribution in the usual way.

I have the honour to be, Sir,
Your obedient Servant,

P. S. MESNY,
Acting-President, Board of Health.

Arthur W. Bell, Esq.,
Bailiff, and President of the States of Guernsey.

GUERNSEY.

Guernsey, the most western of the Channel Islands, lies in the Bay of Avranches, 82 miles from Weymouth, the nearest English port, 40 from Cherbourg, and 63 from St. Malo.

It is triangular in shape, with an area of 24.5 square miles and an acreage of 15,654. The soil, composed of disintegrated granite and schist, is very fertile. Enormous quantities of tomatoes, grapes and other fruit, vegetables and flowers are grown, chiefly under glass, for export.

This industry is the chief one, but in addition, large quantities of granite for road-making are exported. The rearing, for sale in England and the United States, of the far-famed Guernsey cattle (including those from Alderney and Sark) is an important industry. These cattle are highly prized, not only for the richness of their milk, but above all for their freedom from Tuberculosis.

There are two harbours, situated at St. Peter-Port and St. Sampson's, the two towns of the island.

The population at the census of 1911 was 41,854; in 1921 it was stated to be 37,914 with 1,098 visitors, and the provisional figures for 1931 shew a population of 40,470.

Guernsey is a health resort throughout the year, but particularly so in the summer and autumn months. Not only are its natural beauties so great, but its salubrious yet bracing climate is highly attractive. It is cooler in summer and warmer in winter than on the mainland.

Drainage is good and modern in the towns. The water supply, now the property of the Government of the island, is of exceptional purity and derived from deep wells, but additional sources of supply from streams have lately been obtained.

Guernsey enjoys Home Rule. With Alderney and Sark it forms a Bailiwick and is governed by a Lieutenant Governor. The Bailiff is the chief Civil Official.

Houses—Inhabited (1931 Census)	9,795
Number of families accommodated in States Houses since 1921	269
Density of Population, per acre	2.58
,, ,, per square mile	1,649
Average number of inhabitants per house	4.1
Birth rate per 1,000	18.8
Death Rate per 1,000 (crude)	11.7
,, ,, ,, (standardized)	9.3
Infantile Death Rate	38.0
Rainfall average 89 years	36.9
,, 1931	35.8

(In parts of the Island the rainfall is only 70 per cent of the average.)

Mean Relative Humidity	83.0
Mean Average Temperature	51.3
Mean Daily Range	8.0
Average hours of sunshine over 38 years	1,899.3
Sunshine 1931	1,753.8

Guernsey holds the record for sunshine for the British Isles.

EXPORTS.

	1931
Tomatoes	25,830 tons.
Flowers	3,878 ,,
Grapes (in cases and baskets)	925 ,,
Vegetables (including potatoes)	1,305 ,,
Granite	137,938 ,,

THIRTY-THIRD ANNUAL REPORT

OF THE

STATES

Medical Officer of Health, Guernsey

For the year 1931.

Table I.

YEAR.	Estimated population to middle of each year.	BIRTHS per 1,000.		DEATHS per 1,000.			DEATHS under 1 year of Age.	
		Number	Rate.	Number	Crude Rate.	Standardised Rate.	Number.	Rate per 1,000 Births
1921........ ..	37,914	768	20·0	502	13·2		60	78·0
1922.........	38,200	810	21·2	537	14·0		76	90·0
1923.........	38,200	764	20·8	551	13·3		58	73·0
1924.........	38,400	753	19·8	466	12·1	9·6	40	53·1
1925.........	38,580	758	19·9	522	13·5	10·7	56	74·0
1926.........	38,650	787	20·3	549	14·2	11·2	81	102·9
1927.........	38,880	760	19·6	532	13·7	10·9	57	75·0
1928.........	39,000	813	20·8	485	12·4	9·9	48	59·0
1929.........	39,040	756	19·4	586	15·1	12·0	59	78·0
1930	40,215	757	18·8	486	12·1	9·6	50	66·0
Averages for ten years, 1921-1930.	38,707	772	20·0	521	13·3	10·4	58	74·9
1931.	40,470	764	18·8	475	11·7	9·3	29	38·0

Table II.

VITAL STATISTICS.—ENGLAND AND WALES, AND GUERNSEY. FOR THE YEAR 1931.

	Rate per 1,000 population. Live births.	Deaths. (Crude rate.)	Deaths under 1 year per 1,000 live births
England and Wales	15·8	12·3	66
107 County Boroughs and great towns including London	16·1	12·3	70
159 smaller Towns	15·6	11·3	62
London	15·0	12·6	67
Guernsey	18·8	11·7	38
do. standardised	—	9·3	—

POPULATION.

The estimate of population upon which my data are based is that of the census of 1931 as given in the provisional figures, viz. :—40,470 persons, males 19,485 and females 20,985.

With the exception of Malta, Guernsey is the most densely populated island in the British Empire, having 1,651 persons to the square mile.

It is easy to make comparisons of vital statistics between England and Wales, Jersey, and Guernsey, where actual numbers are given, as in the former case the population is about 1,000 times greater, and in the case of Jersey 25 per cent. greater than that of Guernsey, but in both instances such a comparison would be slightly against Guernsey.

BIRTHS.

There were 764 births during the year, and the birth rate, 18.8, is the same as it was in 1930. In 1901 it was 27.2 but it was then recorded that the average for the preceding 10 years was 30.7.

There were 27 still births (Males 14, Females 13) and 42 illegitimate births, percentages to the total of 3.5 and 5.5 respectively.

Figures for England and Wales are given above, but in some towns, particularly seaside and residential ones, the birth rate is very low, even lower than the death rate, *e.g.*, Weston-super-Mare, 9.77 and 13.2; Ilfracombe, 9.9 and 16.3, for 1931.

DEATHS.

The number of deaths registered was 475, being 11 less than last year, giving a crude death rate of 11.7, and a standardised one of 9.3. In 1901 the crude death rate was 17.3. It is sad to have to report that there were 4 deaths resulting from childbirth, which is at the rate of 5.2 per 1,000 births. This is a very high figure and I must in justice compare it with the figures for the 31 years of the century. 27,683 births, 59 deaths and rate 2.13 per 1,000, which is about half that of England

and Wales. The deaths during the four quarters of the year were respectively 149, 121, 97, 108. The average age at death was for males 57.6 and for females 59.6 years.

The number of deaths in Public Institutions was as follows:—

Town Hospital	52
Town Mental Hospital	—
Country Hospital	45
Country Mental Hospital	4
Victoria Hospital	13
King Edward Sanatorium	1

PERCENTAGE OF DEATHS AT DIFFERENT AGE PERIODS.

	Under 1 year.	Years 1-5.	Years 5-15.	Years 15-25.	Under 25 years.	Years 25-65.	Over 65 years.
1900-1904	24·0	9·0	4·0	5·0	42·0	27·0	31·0
1905-1909	22·3	8·0	3·0	4·6	38.0	28·0	34·0
1910-1914	20·2	7·2	3·3	3·8	34·5	27·8	37·7
1915-1919	12·5	5·1	3·6	4·9	26·2	33·1	40·7
1920-1924	11·5	3·6	3·7	5·5	24·4	30·4	45·3
1925-1929	11·2	3·4	2·5	4·0	21·2	30·2	48·6
1929	10·1	2·6	2·4	4·1	19·2	28·8	52·0
1930	10·2	5·0	1·9	3·9	21·0	28·6	50·4
1931	6·1	2·5	1·5	2·8	12·9	31·6	55·5

There were 93 deaths of persons in the receipt of Old Age Pensions. The average age at death for both sexes was 80.1 years.

INFANTILE MORTALITY.

The figures for the year are certainly the lowest ever recorded here. There were 29 deaths under 1 year, giving a rate of 38 per 1,000 live births. In 1901 the rate was 171, and for the past 10 years, 74.9, so that 1931 has practically halved the latter figure.

The deaths under 1 month numbered 14, or 48 per cent. of the total. There were no deaths from infectious diseases, and only three from respiratory ones: 10 were due to prematurity or debility at birth.

It is remarkable that during the third quarter of the year more than half the deaths should have been registered. The figures for the four quarters being 7, 2, 15, 5. I am unable to give any reasons why this should have been so.

CAUSES OF DEATHS OF CHILDREN UNDER 1 YEAR OF AGE, 1931.

Causes of Death.	Under 1 week.	Between weeks 1-2	2-3	3-4	Under 1 month.	Between Months 1-3	3-6	6-9	9-12	Ttl.
No. 3. *Diseases of the Nervous System and Sense Organs.*										
Meningitis	–	–	–	–	—	–	–	1	–	1
Convulsions	–	1	–	–	1	–	–	1	–	2
No. 5. *Diseases of the Respiratory System.*										
Pneumonia	–	–	–	–	—	–	1	1	–	2
Broncho Pneumonia	–	–	–	–	—	–	1	–	–	1
No. 6. *Diseases of the Digestive System.*										
Gastro-Enteritis	–	–	1	–	1	1	–	–	–	2
No. 11. *Congenital Malformations.*										
Congenital Malformation	1	–	–	–	1	1	–	–	–	2
,, Heart Disease	1	–	–	–	1	–	–	–	–	1
No. 12. *Diseases of Early Infancy.*										
Debility at Birth	1	–	–	–	1	–	–	–	–	1
Marasmus	–	–	–	–	—	5	1	–	–	6
Premature Birth	8	1	–	–	9	–	–	–	–	9
No. 14. *External Causes.*										
Burns	–	–	–	–	—	–	1	–	–	1
No. 15. *Ill-defined.*										
Natural Causes	–	–	–	–	—	–	1	–	–	1
Totals	11	2	1	–	14	7	5	3	–	29

MARRIAGES.

The number of marriages was slightly lower than the preceding year, but is much the same as for several years past. Of the 310, there were 172 in Church of England, 26 in Roman Catholic, and 41 in Non-Conformist Churches, 68 at the Greffe Office, and 3 in private houses. The rate was 15.3 per 1,000.

INFECTIOUS DISEASES.

There were 128 cases of infectious diseases during the year, which were dealt with by the Board of Health. Only two were non-notifiable. A considerable number of doubtful cases were admitted as is usually our experience. A hospital such as the Sanatorium, and in such an area as Guernsey, should take in not only cases of doubtful notifiable infectious diseases, but non-notifiable ones which may occur in public institutions, hotels, and boarding houses, or under other exceptional circumstances, as well as cases of sepsis which it is not advisable to admit to other hospitals, whenever it has accommodation for them. Such a policy adds greatly to its sphere of usefulness to the public who pay for the cost of the upkeep of the institution.

DIPHTHERIA.

There were 32 cases of this disease notified, not all of which proved to be genuine cases: 24 were in the first six months and 8 in the latter half of the year. All but one of the cases were isolated at the Sanatorium, and there was one death at the Country Hospital. There were 22 in the Town parish, none in the three western ones, and a total of 10 in the other parishes. St. Sampson's and Castel, 3 each; Vale, Forest, St. Martin's and St. Andrew's, 1 each.

The genuine cases were of above average severity.

SCARLET FEVER.

This disease prevailed during the whole year, the cases being of uniformly severe character. Of the 84 cases, only 3 were isolated at home. There was one death at the Sanatorium, a haemorrhagic case.

The country parishes suffered from a higher incidence than the Town: St. Sampson's, the Vale, Castel and St. Martin's being the chief parishes affected.

TYPHOID FEVER.

There was only one case notified and that was contracted in England. Following a long illness and convalescence the patient died a few days after returning home from the Sanatorium.

TUBERCULOSIS.

There were 26 deaths registered from pulmonary phthisis, and 4 from other forms of tuberculosis, giving a rate per 1,000 of phthisis 0.64.2, and other forms 0.09, a total of 0.73.2.

In 1901 the figures were respectively 52 and 25, total 77, and the rates 1.29, 0.62, total 1.91. The rate for phthisis in 1931 is 50 per cent. below that of 1901, and for other forms no less than 84 per cent. The age incidence of the latter is very different. In 1931, two deaths occurred between the ages of 15 to 25, and two at over 40 years of age. In 1901, 18 of the 25 deaths were those of children under 5 years of age. The chief explanation of this remarkable difference is that in 1901 the then recent outbreak of bovine tuberculosis was at its height, but for many years past, as a result of the strenuous efforts of the Island Authorities, this disease has been absent from our herds, and our community now enjoys the blessing of a milk supply, not only free from tubercle, but of unequalled richness in butter fat.

As I look back over the stormy and difficult years when this good work was being accomplished, I am convinced that to Mr. G. W. Foote, our oldest Veterinary

Surgeon, the chief credit is due for this great success. His great influence amongst the farmers and intensely hard work have not received the recognition that they should have had.

During the year 8 cases of phthisis were admitted to the Sanatorium, the average duration of their stay being 61 days.

The results of their treatment were perhaps better than in past years, but still leave much to be desired: 3 seem to have recovered sufficiently to follow their employment with but slight risk of any relapse, 3 have shewn some improvement and two have died.

In July I attended as your delegate the Annual Conference of the National Association for the Prevention of Tuberculosis at Margate. The special subject for consideration was the prevention of tuberculosis in the child and young adult. The conclusions of its debates may be briefly summarised as follows:—

Forty to fifty per cent. of cattle in England are suffering from tuberculosis, although they are not all infective. The tubercle bacillus can be found in 1 to 5 (Orr 6-7 per cent.) of mixed milk samples. In the case of young children the bovine bacillus is very frequently the source of infection, and milk is the cause of a large number of deaths, and a larger number of cases of chronic invalidism and crippling, which seriously handicap the sufferer throughout life.

Pulmonary tuberculosis has greatly decreased in the past half century: the bovine type has shewn only a slight decrease.

Pulmonary tuberculosis is rare amongst children of school age, but is increasing in adolescence, particularly amongst girls.

The "Grancher" system of France, by which the new-born child which is not tuberculous, is taken from its tuberculous mother and sent to country districts to be brought up under safe conditions, is not possible for economic and other reasons in England. In this connection the shortest speech of the Conference, but one of the most effective, was made, when a member said: "Cannot a tuberculous woman be prevented from having children?" This question was not answered but was loudly applauded.

Calmette's system of inoculating infants with avirulent bacilli attenuated by subculture as a preventive against tuberculosis was fully discussed. Many members had recently heard the Professor lecture upon this subject, and ignoring deplorable incidents which had occurred as a result of faulty technique, the almost universal opinion was that the case for the B.C.G. vaccine has not been made out, also that the use of the word "inoculation" was preferable to that of "vaccine".

The theory that the presence of bovine bacilli in the milk given to infants might really benefit them by securing some immunity against attack by the human type of bacillus in later life, was discussed. The dose of bovine bacilli is unknown and uncontrolled. It may be so large as to give rise to fatal symptoms. The policy of the Ministry of Health to secure a milk supply free from tubercle was endorsed by an overwhelming majority.

The Conference was of opinion that the frequency of senile infective phthisis was under-rated, and some striking instances of children who had contracted meningitis apparently as a result of recent exposure to such cases were mentioned.

After being present at this instructive conference, I formed the opinion that the inhabitants of Guernsey had much for which to be thankful in the matter of tuberculosis.

MILK SUPPLY.

During the year two new dairies were opened, both fitted with pasteurising, cooling and bottling plants.

Thirty years ago there were comparatively few retailers of milk, and excepting the shops, they were chiefly the bigger farmers. To-day the coming of the motor has greatly altered the conditions. It appears to me that the most profitable part of the milk business is not production as it should be, but distribution. There is therefore a tendency to combine the two processes, and there must be, I should imagine, hundreds of people engaged in milk distribution, which seems to continue throughout the day until late in the evening. In many instances private cars are used for the purpose.

A vendor may take milk from several farmers, often picking up cans left in hedges or other odd spots. When the town is reached there are certain what may be called roadside exchange stations, where shortages are made good from the stocks of other vendors, and exchanges made. Numbers of small girls rush about on bicycles carrying a can with a measure. The pouring out and measuring of milk in the streets is obviously an objectionable method, but it is still largely in use. At present should there be any outbreak of illness, of which milk was the cause, it might be almost impossible to trace the source of infection quickly, if at all.

The question of pasteurisation was very fully discussed in the local newspapers in the course of the year, several English authorities having taken part in the discussion. Admittedly the destruction of the tubercle bacillus is one of the chief objects of the process, and hence it was argued that in Guernsey it was not necessary, there being no bovine tuberculosis.

In England "Certified" and "Grade A. T.T." milk is not pasteurised, but there is only a very small supply of it. Only 0.5 per cent. of the dairy stock is guaranteed tubercle free.

In Guernsey, although the greater quantity of the milk is produced in a cleanly manner some of it is not, and a small quantity is produced under very unsatisfactory conditions. I have already criticised the methods of distribution, and as other illnesses besides tuberculosis may be spread by milk, and persons engaged in its handling may also infect it, under ordinary conditions I am a strong advocate of pasteurisation.

The rapid cooling of milk and the use of sealed bottles for its distribution are such obviously valuable measures that they will be increasingly adopted in the future.

From the Public Health point of view it is much to be desired that the milk supply should be in the hands of large firms with sufficient capital to ensure not only an adequate plant, but skilled labour to supervise its working. For example, if milk be distributed in bottles which have not been properly cleaned, the last state of it may be worse than the first.

It has been urged as an objection to pasteurisation that it does away with the incentive to produce milk under the best conditions. In practice, it is found that so far from this being the case, the large firms encourage the producer in every way to improve his supply by frequent tests, and in many instances increased payment for specially good milk.

LABORATORY.

There were 360 specimens of various kinds examined in the Board of Health Laboratory during the year, a much smaller number than were undertaken a few years ago. The year was, however, one with comparatively little sickness.

SANITARY INSPECTIONS.

For the reasons I mentioned last year, which also operated in the first half of the year under review, I cannot give full details of this service, or of disinfection.

The ambulance and disinfecting van made, however, 298 journeys, and my incomplete records show that 2,931 articles of various kinds were disinfected without any claims being made for damaged articles. This latter statement also applies to many years past.

ABATTOIR AND MARKETS.

I am glad to say that there are no private slaughter houses as on the mainland, in Guernsey. The Abattoir and Markets are under the control of a Special Committee; a full-time Veterinary Surgeon is employed. It is forbidden under the Bovine Tuberculosis Ordinance to import live cattle into the island except from Alderney, Sark and Herm, and then only after veterinary inspection and tuberculin testing.

FOOD ANALYSIS.

There were 51 samples analysed during the year—milk 40, butter 3, cream 3, and water 5. The States Water Board arrange for their own analyses, but samples may be taken by the Board of Health also. One milk vendor was prosecuted for adding boracic acid to milk and fined £10 on conviction.

CREMATION.

There were only four bodies cremated during the year, one of which was brought from Jersey.

The progress of cremation is very slow in England, less than 1 per cent. of the dead being cremated. On the Continent the percentage is much higher, and is rapidly increasing.

The recognition of the fact that there is the same ceremony for the pauper as for the rich man will, I believe, in time, cause its more general adoption.

The fees in Guernsey are very low, but I believe it would be wise in the public interest to make no charge for cremation, and thus help to prevent more of our restricted and valuable land being used for cemeteries in the future.

HOUSING ACCOMMODATION.

After having provided accommodation for 269 families, the Homes for Workers Committee have for the time being ceased further building operations.

The birth rate continues to be so high that I believe they will be obliged to undertake further responsibilities in this matter. By doing so they will also help to relieve the pressing question of unemployment, and advantage should be taken of the present low prices of building materials. Every effort should be made to keep rents as low as possible: a working class family so often has to pay such a high proportion of its wages in rent, that the vitally important adequate nutrition becomes impossible unless at times a proportion of the rent be provided from the funds of the States.

PRIMARY SCHOOLS.

The health of the children attending these schools has been very good during the year, the average attendance of children of school age, i.e., over 6 years, being 92.2 per cent.

This is an excellent record when it is realised that in both urban and rural areas, many children have to walk long distances between their homes and their schools.

As there is no School Medical Officer such a favourable result is a great tribute to the work of the able and devoted School Nurse who brings so many children to me for inspection. As a volunteer, I have examined 535 such children, about 11 per cent. of the total, during the year, and referred those requiring treatment to the proper authorities. In a large proportion of the cases this treatment has been provided.

DRAINAGE AND REFUSE COLLECTION.

As regards Drainage and Refuse Collection, there have been no fresh developments during the year, and it seems unnecessary to repeat the criticisms of these subjects made in former reports, in which they have been fully discussed.

THALASSOL.

The number of gallons of this disinfectant supplied by the States in nearly all instances free, was 18,120.

In 1930 the quantity was 18,780 gallons.

The plant is maintained in excellent condition, and the total cost of its working was £151.

The almost complete replacement of the horse on our roads by the faster motor traffic has made the roads much cleaner, and therefore greatly diminished the number of breeding places for flies. It has, however, had the result of making the pavements more dirty and offensive as a result of the excreta of dogs being so freely deposited upon them. The Royal Borough of Kensington took the initiative in adopting bye-laws to prevent this nuisance, and a large number of other towns have followed its lead in the matter. It appears to me that in Guernsey our pavements are very foul, and an Ordinance should be passed which would render persons who permitted dogs under their charge to deposit their excreta upon them, liable to a penalty for so doing. The gutters should be used instead of the pavements.

Although there is an Ordinance forbidding the depositing of litter in public places, and our buses nearly all have notices asking people to observe it, the condition of our coasts and other much visited places is really deplorable. The amount of refuse of all sorts with which they are sullied forces me to the conclusion that " only man is vile ". It is not too much to expect people to carry the refuse of picnics, etc., away with them, but the authorities should provide large numbers of wire baskets, painted a brilliant red in order to be conspicuous, in which they might place it. At present, with the exception of those in Candie Gardens, which seem to be freely used, these receptacles are very few and far between to say the least of it.

In previous reports I have mentioned the fact that the powers of the Board of Health and its officials are very limited, and require to be greatly enlarged in order to deal more efficiently with questions affecting the Public Health of the Island.

Incidentally it is very difficult for the M.O.H. to produce satisfactory reports year by year, as amongst the various authorities concerned with the Public Health are the 10 Parish Douzaines and the Constables, the Board of Health, the Board of Administration, the Island Drainage Board, the Construction of Houses Committee, and the Island Sanitation Committee. Some of these authorities issue reports and some do not, so that the M.O.H. is not cognisant in many cases of the work which they have accomplished.

It would surely be wise to concentrate all the functions of these Committees which deal with the Public Health under one control, viz., a local Ministry of Health.

Amongst the questions which are becoming more and more urgent are the provision of sanitary accommodation for visitors in our bays and country districts. The large extent of our coast compared with the ordinary seaside resort make this an urgent matter here. It is one that chiefly concerns women, and I am surprised that in these days of equality they do not insist upon free and equal treatment in this respect.

These matters are now under consideration, but in spite of the difficulties mentioned a review of the past 30 years will shew that Guernsey has made just as much, if not more, improvement in the health of its people, than has England with its more costly and elaborate system. This should, however, act as an incentive to us to improve as much as possible the sanitary conditions of our beautiful island by every means in our power.

CAUSES OF, AND AGES AT DEATH, OF DEATHS REGISTERED DURING 1931.

CAUSE OF DEATH.	Under 1 yr.	Between 1-2	2-5.	5-15.	15-25.	25 to 65.	Over 65.	Total
No. 1. *Epidemic, Endemic, and Infectious Diseases.*								
Influenza	—	—	—	—	—	2	4	6
Scarlet Fever	—	—	—	—	1	—	—	1
Diphtheria	—	—	—	1	—	—	—	1
Tuberculosis (All forms.)								
Phthisis	—	—	—	—	5	19	2	26
Tuberculosis of Joints	—	—	—	—	1	—	—	1
Tubercular Peritonitis	—	—	—	—	1	2	—	3
Septicæmia	—	—	—	—	—	2	1	3
No 2. *General Diseases not Included in* No 1.—								
Cancer	—	—	1	—	—	27	37	65
Pernicious Anæmia	—	—	—	—	—	—	1	1
Lukæmia	—	—	—	—	—	4	—	4
Graves' Disease	—	—	—	—	—	1	—	1
Alcoholism	—	—	—	—	—	1	—	1
Diabetes	—	—	—	—	—	2	1	3
Addison's Disease	—	—	—	—	—	1	—	1
Elephantiasis	—	—	—	—	—	1	—	1
Purpura	—	—	—	—	—	1	—	1
No 3. *Diseases of the Nervous System and Sense Organs*—								
General Paralysis of the Insane	—	—	—	—	—	1	—	1
Meningitis	1	—	—	—	—	1	—	2
Paralysis Agitans	—	—	—	—	—	1	1	2
Convulsions, (Non-Puerpural)	2	—	1	—	—	—	—	3
Epilepsy	—	—	—	2	—	—	—	2
Landry's Paralysis	—	—	—	—	—	2	—	2
Cerbral Thrombosis	—	—	—	—	—	–	1	1
Apoplexy (Cerebral Hæmorrhage)	—	—	—	—	—	5	20	25
Disseminated Sclerosis	—	—	—	—	—	1	—	1
Carried forward	3	–	2	3	8	74	68	158

Brought forward ..	3	–	2	3	8	74	68	158
No. 4. *Diseases of the Circulatory System—*								
Gangrene	—	—	—	—	—	—	4	4
Embolism	—	—	—	—	—	—	1	1
Aneurysm	—	—	—	—	—	1	3	4
Angina Pectoris	—	—	—	—	—	2	3	5
Thrombosis	—	—	—	—	—	2	2	4
Atheroma	—	—	—	—	—	2	4	6
Heart Disease	—	—	2	1	1	24	51	79
No. 5. *Diseases of the Respiratory System*								
Acute Bronchitis	—	1	—	—	—	1	2	4
Chronic ,,	—	—	—	—	—	4	12	16
Asthma	—	—	—	—	—	—	2	2
Pneumonia	2	—	1	1	2	6	8	20
Broncho—Pneumonia	1	—	1	—	—	—	7	9
No. 6. *Diseases of the Digestive System—*								
Strangulated Hernia	—	—	—	—	—	—	1	1
Appendicitis	—	—	1	—	—	—	1	2
Intestinal Obstruction	—	—	—	—	—	1	2	3
Parotitis	—	—	—	—	—	—	1	1
Peritonitis	—	—	—	—	—	2	—	2
Gall Stone	—	—	—	—	—	1	3	4
Cirrhosis of Liver	—	—	—	—	—	1	3	4
Gastro Enteritis	2	1	—	—	—	—	1	4
Gastric Ulcer	—	1	—	—	—	5	—	6
Pancreatitis	—	—	—	—	—	1	—	1
Acute Atrophy of Liver	—	—	—	—	—	—	1	1
No. 7. *Non-Venereal Diseases of the Genito Urinary System—*								
Chronic Nephritis	—	—	—	—	—	9	11	20
No 8. *The Puerpural State—*								
Septicæmia	—	—	—	—	1	1	—	2
Hæmorrhage	—	—	—	—	—	2	—	2
Carried forward	8	3	7	5	12	139	191	365

Brought forward.	8	3	7	5	12	139	191	365
No 9. *Diseases of the Skin and Cellular Tissue*—								
No 10. *Diseases of the Bones and Organs of Locomotion*—								
Osteomyelitis	—	—	—	—	—	1	—	1
No 11. *Congenital Malformations*—								
Congenital Malformation	2	—	—	—	—	—	—	2
,, Heart Disease	1	1	1	—	—	—	—	3
No 12. *Diseases of Early Infancy*—								
Debility at Birth	1	—	—	—	—	—	—	1
Marasmus	6	—	—	—	—	—	—	6
Premature ,, ...	9	—	—	—	—	—	—	9
No 13. *Senile Decay*—								
Senile Decay.	—	—	—	—	—	—	70	70
No 14. *External Causes*—								
Suicide.	—	— —		—	—	7	—	7
Fall.	—	—	—	—	—	1	1	2
Poisoning	—	—	—	—	—	1	—	1
Burns	1	—	—	—	—	—	—	1
Run Over	—	—	—	1	—	—	1	2
Drowning	—	—	—	1	1	—	—	2
Sunstroke	—	—	—	—	—	1	—	1
No 15. *Ill-Defined*—								
Natural Causes.	1	—	—	—	—	—	1	2
Total	29	4	8	7	13	150	264	475

RETURN OF BIRTHS AND DEATHS REGISTERED DURING 1931.

BIRTHS.

PARISH LETTER :	St. P.-Port. A	St. Sampson B	Vale. C	Castel. D	St. Saviour. E	St. Pierre-du-Bois. F	Torteval. G	Forest. H	St. Martin. I	St. Andrew. K	Total
Males	150	53	50	29	4	20	4	9	33	12	364
Females	183	51	45	41	8	8	1	6	43	14	400
Totals	333	104	95	70	12	28	5	15	76	26	764
Deaths under 1 year	12	3	4	9	–	1	–	–	–	–	29
Still Births Male	5	–	1	3	2	–	–	–	3	–	14
Still Births Female	9	–	–	2	–	–	–	–	2	–	13
	14	–	1	5	2	–	–	–	5	–	27
Illegitimate	15	2	2	14	–	–	–	1	6	2	42

DEATHS.

PARISH LETTER :	A	B	C	D	E	F	G	H	I	K	Total
No. 1. *Epidemic, Endemic and Infectious Diseases.*											
Influenza	2	2	–	1	–	–	–	–	1	–	6
Scarlet Fever	1	–	–	–	–	–	–	–	–	–	1
Diphtheria	1	–	–	–	–	–	–	–	–	–	1
Tuberculosis (all forms).											
Phthisis	16	3	–	4	–	–	–	–	2	1	26
Tuberculosis of Joints	–	–	–	1	–	–	–	–	–	–	1
Tubercular Peritonitis	2	–	–	–	1	–	–	–	–	–	3
Septicæmia	2	–	–	–	–	–	–	–	–	1	3
No. 2. *General Diseases not included in* No. 1.											
Cancer	33	6	6	7	1	1	1	2	5	3	65
Pernicious Anæmia	–	–	1	–	–	–	–	–	–	–	1
Lukæmia	1	–	–	2	–	–	1	–	–	–	4
Graves Disease	1	–	–	–	–	–	–	–	–	–	1
Alcoholism	–	1	–	–	–	–	–	–	–	–	1
Diabetes	2	1	–	–	–	–	–	–	–	–	3
Addisons Disease	1	–	–	–	–	–	–	–	–	–	1
Elephantiasis	–	–	–	–	–	–	–	–	1	–	1
Puerpura	1	–	–	–	–	–	–	–	–	–	1
Carried forward	63	13	7	15	2	1	2	2	9	5	120

Brought forward	63	13	7	15	2	1	2	2	9	5	120
No. 3. *Diseases of the Nervous System and Sense Organs.*											
General Paralysis of the Insane	–	–	–	1	–	–	–	–	–	–	1
Meningitis	1	–	–	–	–	–	–	–	1	–	2
Paralysis Agitans	1	1	–	–	–	–	–	–	–	–	2
Convulsions (non-Puerpural)	1	–	–	1	–	1	–	–	–	–	3
Epilepsy	1	–	–	–	–	–	1	–	–	–	2
Landry's Paralysis	1	–	–	–	–	–	–	–	1	–	2
Cerebral Thrombosis	1	–	–	–	–	–	–	–	–	–	1
Apoplexy (Cerebral Hæmorrhage)	12	2	2	6	–	1	1	–	1	–	25
Disseminated Sclerosis	–	–	–	–	–	–	–	–	1	–	1
No. 4. *Diseases of the Circulatory System.*											
Gangrene	4	–	–	–	–	–	–	–	–	–	4
Aneurysm	2	–	–	1	–	–	–	–	1	–	4
Angina Pectoris	1	1	1	–	–	–	–	1	–	1	5
Thrombosis	3	–	–	1	–	–	–	–	–	–	4
Atheroma	3	–	–	–	–	–	1	–	1	1	6
Heart Disease	37	6	10	7	2	3	–	3	6	5	79
Embolism	–	–	–	–	–	1	–	–	–	–	1
No. 5. *Diseases of the Respiratory System.*											
Acute Bronchitis	2	1	–	–	–	1	–	–	–	–	4
Chronic Bronchitis	9	2	2	1	1	–	–	–	1	–	16
Asthma	–	–	–	2	–	–	–	–	–	–	2
Pneumonia	9	2	–	2	–	–	–	1	4	2	20
Broncho-Pneumonia	7	–	1	–	–	–	–	1	–	–	9
No. 6. *Diseases of the Digestive System.*											
Strangulated Hernia	–	–	–	–	1	–	–	–	–	–	1
Appendicitis	2	–	–	–	–	–	–	–	–	–	2
Intestinal Obstruction	3	–	–	–	–	–	–	–	–	–	3
Parotitis	1	–	–	–	–	–	–	–	–	–	1
Peritonitis	1	–	1	–	–	–	–	–	–	–	2
Gall Stone	4	–	–	–	–	–	–	–	–	–	4
Cirrhosis of Liver	3	–	–	–	–	–	–	–	–	1	4
Gastro Enteritis	1	–	–	2	–	–	–	–	–	1	4
Gastric Ulcer	4	1	1	–	–	–	–	–	–	–	6
Pancreatitis	–	–	–	–	–	–	–	–	1	–	1
Acute Atrophy of Liver	–	1	–	–	–	–	–	–	–	–	1
Carried forward	177	30	25	39	6	8	5	8	27	16	341

Brought forward	177	30	25	39	6	8	5	8	27	16	341
No. 7. *Non-Venereal Diseases of the Genito-Urinary System.*											
Chronic Nephritis	7	2	2	3	3	–	–	–	1	2	20
No. 8. *The Puerpural State.*											
Septicæmia	2	–	–	–	–		–	–	–	–	2
Hæmorrhage	1		–	–	–	1	–	–	–	–	2
No. 9. *Diseases of the Skin and Cellular Tissue.*											
No. 10. *Diseases of the Bones and Organs of Locomotion.*											
Osteomyelitis	–	1	–	–	–	–	–	–	–	–	1
No. 11. *Congenital Malformations.*											
Congenital Malformation	2	–		–	–	–	–	–	–	–	2
,, Heart Disease	–	–	1	–	–	1	–	–	1	–	3
No. 12. *Diseases of Early Infancy.*											
Debility at Birth	1	–	–	–	–	–	–	–	–	–	1
Marasmus	3	1	1	1	–	–	–	–	–	–	6
Premature Birth	2	1	1	5	–	–	–	–	–	–	9
No. 13. *Senile Decay.*											
Senile Decay	30	9	7	7	4	4	–	1	8	–	70
No. 14. *External Causes.*											
Suicide	3	1	–	1	1	1	–	–	–	–	7
Fall	1	1	–	–	–	–	–	–	–	–	2
Poisoning	1	–	–	–	–	–	–	–	–	–	1
Burns	–	–	1	–	–	–	–	–	–	–	1
Run Over	2	–	–	–	–	–	–	–	–	–	2
Drowning	1	1	–	–	–	–	–	–	–	–	2
Sunstroke	1	–	–	–	–	–	–	–	–	–	1
No. 15. *Ill-Defined.*											
Natural Causes	2	–	–	–	–	–	–	–	–	–	2
Totals	236	47	38	56	14	15	5	9	37	18	475

HY. DRAPER BISHOP,
States M.O.H.

XIV. 1932